COPY OF PAPERS **ORIGINALLY FILED**  Docket No. 0152.00420



## Declaration and Power of Attorney For Patent Application

## **English Language Declaration**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

	MONOLITHIC BEDS					
	the specification of which					
	(check one)					
	<ul><li>is attached hereto.</li><li>□ was filed on</li><li>Application Number</li></ul>			States Application No	o. or PCT	International
	and was amended on					
divide the line had been divided to	(if applicable)					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.					
	I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.					
	I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.					
	Prior Foreign Application(s)				Priority	Not Claimed
	(Number)		<del></del>	/D /M 110/ F1 1	<del>-</del>	
	(Number)	(Country)		(Day/Month/Year Filed	)	
	(Number)	(Country)	<del></del>	(Day/Month/Year Filed	<del>-</del> )	••••••••••••••••••••••••••••••••••••••
	(Number)	(Country)		(Day/Month/Year Filed	)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number) Amy E. Rinaldo (Reg. No. 45,791) Kenneth I. Kohn (Reg. No. 30,955) Send Correspondence to: Kenneth I. Kohn Kohn & Associates 30500 Northwestern Hwy., Suite 410 Farmington Hills, Michigan 48334 Direct Telephone Calls to: (name and telephone number) (248) 539-5050 12 Full name of sole or first inventor ı **Abdul Malik** Date Sole or first inventor's signature 12-6-01 Residence Tampa, Florida 14 Citizenship US Ш Post Office Address 4202 East Fowler Avenue, SCA 400 Tampa, Florida 33620-7900 Full name of second inventor, if any Date Second inventor's signature Residence Citizenship

Post Office Address